

PART B - FEE(S) TRANSMITTAL

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22850 7590 05/20/2008

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/516,312	12/12/2005	Ken Sakamura	263133US90XPCT	3891

TITLE OF INVENTION: ELECTRONIC VALUE TRANSFER DEVICE EQUIPPED WITH NON-CONTACT IC INTERFACE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	08/20/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
HESS, DANIEL, A	2876	235-380000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. <u>Oblon, Spivak,</u> 2. <u>McClelland, Maier</u> 3. <u>& Neustadt, P.C.</u>
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)
1. Ken SAKAMURA	1. Tokyo, JAPAN
2. Noboru KOSHIZUKA	2. Musashino-shi, JAPAN
3. NTT DoCoMo, Inc.	3. Tokyo, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)
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Authorized Signature



Typed or printed name Paul J. Killas

Date

JUL 14 2008

Registration No. Registration No. 58,014

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